

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>CS</i>	<i>68225</i>	<i>10/26/98</i>
O.I.P.E. CLASSIFIER		<i>21</i>	<i>11/3/98</i>
FORMALITY REVIEW	<i>HC</i>	<i>71470</i>	<i>12/10/98</i>
		<i>71470</i>	<i>3/25/99</i>

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
✓	Allowed	I	Interference
✓	(Through numeral) Canceled	A	Appeal
✓	Restricted	O	Objected

Claim	Date
Final	
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Claim	Date
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If more than 150 claims or 10 figures BEST AVAILABLE COPY
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